

# REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:  
Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Application No.: 09/867,323  
Filing Date: 5/29/2001  
First Named Inventor: Jagdish C. Tandon  
Group Art Unit: 2622  
Confirmation No.: 6011  
Examiner Name: Houshang Safaipoor  
Attorney Docket No.: A0155-US-NP

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This is a Request for Continued Examination (RCE)  
under 37 C.F.R. § 1.114 of the above-identified application.

**NOTE:** 37 C.F.R. § 1.114 is effective on May 29, 2000. If the above-identified application was filed prior to May 29, 2000, applicant may wish to consider filing a continued prosecution application (CPA) under 37 C.F.R. § 1.53 (d) (PTO/SB/28) instead of an RCE to be eligible for the patent term adjustment provisions of the AIPA (and 102(e)/103 removal for commonly owned applications). See Changes to Application Examination and Provisional Application Practice Interim Rule, 65 Fed. Reg. 14865 (Mar. 20, 2000), 1293 Off. Gaz. Pat. Office 47 (Apr. 11, 2000); 65 Fed. Reg. 50092 (Aug. 16, 2000), which established RCE practice. [Note that § 1.114 also requires prosecution to be closed to use an RCE.]

## 1. Submission required under 37 C.F.R. § 1.114

- a. ☐ Previously submitted
- ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on (Any unentered amendment(s) referred to above will be entered).
  - ☐ Affidavit(s)/Declaration(s)
  - ☐ Information Disclosure Statement (IDS)
  - ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on
  - ☐ Other
- b. ☒ Enclosed
- ☒ Amendment or Reply
  - ☐ Affidavit(s)/Declaration(s)
  - ☐ Information Disclosure Statement (IDS)
  - ☐ Other

## 2. Miscellaneous

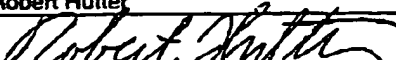
- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(f) (required))
- b. ☐ Other

## 3. Fees

[The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.]


- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Xerox Corporation Deposit Account No. 24-0025.
- ☒ RCE fee required under 37 C.F.R. § 1.17(e) - \$790.00
  - ☐ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17). Please grant any required extension of time.
  - ☐ Other
- b. ☐ A return receipt postcard is enclosed.

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Robert Hutter	Registration No. (Attorney/Agent)	32,418
Signature		Date	1/4/2005

### CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited on the date set forth below with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date set forth below.

Name (Print/Type)	Francie S. LePore	Date	1/4/2005
Signature			

Customer No.: 25453

Xerox Rev. 10/2004

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03/02/2005 KDNV15

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**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective December 29, 1999

Application or Docket Number

09/867.323

**CLAIMS AS FILED - PART I**

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

6/24/04

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	19	Minus	20	=
Independent	2	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
	345.00	OR		690.00
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

11/15/04

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	17	Minus	20	=
Independent	2	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

1-4-0.5

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	17	Minus	20	=
Independent	2	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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